

10-19-01

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Please type a plus sign (+) inside this box [ + ]

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**UTILITY PATENT APPLICATION TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 42390P11916X

(maximum 12 characters)

First Named Inventor Karthisha S. CanagasabyTitle: METHOD AND APPARATUS TO EMULATE EXTERNAL IO INTERCONNECTIONExpress Mail Label No. EL371009814US

**ADDRESS TO:** Assistant Commissioner for Patents  
 Box Patent Application  
 Washington, D. C. 20231

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.   X   **Fee Transmittal Form (e.g., PTO/SB/17)**  
 (Submit an original, and a duplicate for fee processing)
2.        **Applicant Claims Small Entity Status. (37 CFR 1.27)**
3.   X   **Specification (Total Pages   15  )**  
 (preferred arrangement set forth below)
  - Descriptive Title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference sequence listing, a table,  
     or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.   X   **Drawings(s) (35 USC 113) (Total Sheets   4  )**
5.   X   **Oath or Declaration (Total Pages   5  )**
  - a.        Newly Executed (Original or Copy)
  - b.        Copy from a Prior Application (37 CFR 1.63(d))  
 (for Continuation/Divisional with Box 17 completed)
    - i.        **DELETIONS OF INVENTOR(S)** Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
  - c.   X   Unsigned.
6.        **Application Data Sheet. (37 CFR 1.76)**
7.        CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8.        Nucleotide and/or Amino Acid Sequence Submission  
 (if applicable, all necessary)
  - a.        Computer Readable Form (CRF)
  - b.        Specification Sequence Listing on:
    - i.        CD-ROM or CD-R (2 copies); or
    - ii.        paper
  - c.        Statement verifying identity of above copies

2/15/01

- 1 -

JC672 U.S. PTO

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TOTAL 23860

10000 U.S. PTO

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Variable	Mean		SD		t		p	
	Control	Case	Control	Case	Control	Case	Control	Case
Age	21.5	21.5	1.5	1.5	0.0	0.0	0.999	0.999
Gender	10	10	1.0	1.0	0.0	0.0	0.999	0.999
Height	1.70	1.70	0.05	0.05	0.0	0.0	0.999	0.999
Weight	65.0	65.0	10.0	10.0	0.0	0.0	0.999	0.999
Body mass index	22.2	22.2	2.0	2.0	0.0	0.0	0.999	0.999
Heart rate	72.0	72.0	10.0	10.0	0.0	0.0	0.999	0.999
Stroke volume	70.0	70.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output	5.0	5.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999
Stroke volume index	40.0	40.0	10.0	10.0	0.0	0.0	0.999	0.999
Cardiac output index	3.0	3.0	1.0	1.0	0.0	0.0	0.999	0.999

- 18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:**

**Applicant(s):** Also include a Preliminary Amendment to amend the specification to claim priority. For CONTINUATION AND DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

The undersigned states that \_\_\_\_\_ (name of assignee) is the assignee of the entire right, title, and interest in the accompanying patent application by virtue of an assignment recorded in the Patent and Trademark Office at Reel No. \_\_\_\_\_ Frame No. \_\_\_\_\_ (or a copy of which is attached).

\_\_\_\_ Customer Number or Bar Code Label  
or  
\_\_\_\_ (Insert Customer No. or Attach Bar Code Label here)

Country U.S.A. TELEPHONE (408) 720-8300 FAX (408) 720-9397

Signature: Van Buren Date: 10/16/01

**FEE TRANSMITTAL FOR FY 2002****TOTAL AMOUNT OF PAYMENT (\$)** 920.00**Complete if Known:****Application No.** Not Yet Assigned**Filing Date** Herewith**First Named Inventor** Karthisha S. Canagasaby**Group Art Unit** Not Yet Assigned**Examiner Name** Not Yet Assigned**Attorney Docket No.** 42390P11916X**METHOD OF PAYMENT (check one)**

1. ☒ **The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:**

**Deposit Account Number** 02-2666  
**Deposit Account Name** \_\_\_\_\_

☒ **Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17**

☐ **Applicant claims small entity status. See 37 CFR 1.27**

2. ☒ **Payment Enclosed:** ☒ **Check**  
☐ **Money Order**  
☐ **Other**

**FEE CALCULATION****1. BASIC FILING FEE**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>		
101	740	201	370	Utility application filing fee	<u>740.00</u>
106	330	206	165	Design application filing fee	_____
107	510	207	255	Plant filing fee	_____
108	740	208	370	Reissue filing fee	_____
114	160	214	80	Provisional application filing fee	_____

**SUBTOTAL (1)** \$ 740.00**2. EXTRA CLAIM FEES**

		<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
<b>Total Claims</b>	<u>30</u>	<b>- 20** =</b> <u>10</u>	<b>X</b> <u>18.00</u>	<b>=</b> <u>180.00</u>
<b>Independent Claims</b>	<u>3</u>	<b>- 3** =</b> <u>0</u>	<b>X</b> <u>84.00</u>	<b>=</b> _____
<b>Multiple Dependent</b>				<b>=</b> _____

**\*\*Or number previously paid, if greater; For Reissues, see below.**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2)** \$ 180.00

# FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	_____
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	_____
139	130	139	130	Non-English specification	_____
147	2,520	147	2,520	For filing a request for ex parte reexamination	_____
099	8,800	099	8,800	Request for inter parties reexamination	_____
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	_____
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	_____
115	110	215	55	Extension for reply within first month	_____
116	400	216	200	Extension for reply within second month	_____
117	920	217	460	Extension for reply within third month	_____
118	1,440	218	720	Extension for reply within fourth month	_____
128	1,960	228	980	Extension for reply within fifth month	_____
119	320	219	160	Notice of Appeal	_____
120	320	220	160	Filing a brief in support of an appeal	_____
121	280	221	140	Request for oral hearing	_____
138	1,510	138	1,510	Petition to institute a public use proceeding	_____
140	110	240	55	Petition to revive - unavoidable	_____
141	1,280	241	640	Petition to revive - unintentional	_____
142	1,280	242	640	Utility issue fee (or reissue)	_____
143	460	243	230	Design issue fee	_____
144	620	244	310	Plant issue fee	_____
122	130	122	130	Petitions to the Commissioner	_____
123	50	123	50	Processing fee under 37 CFR 1.17(q)	_____
126	180	126	180	Submission of Information Disclosure Stmt	_____
581	40	581	40	Recording each patent assignment per property (times number of properties)	_____
146	740	246	370	For filing a submission after final rejection (see 37 CFR 1.129(a))	_____
148	110	248	55	Statutory Disclaimer	_____
149	740	249	370	For each additional invention to be examined (see 37 CFR 1.129(b))	_____
179	740	279	370	Request for Continued Examination (RCE)	_____
169	900	169	900	Request for expedited examination of a design application	_____
195	300	195	300	Publication fee for early, voluntary, or normal pub.	_____
196	300	196	300	Publication fee for republication	_____
194	130	194	130	Request for voluntary publication or republication	_____
098	130	098	130	Processing fee under 37 CFR 1.17(i) (except provisionals)	_____
091	1,280	091	1,280	Acceptance of unintentionally delayed claim for priority	_____

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3) \$ 0.00**

\*Reduced by Basic Filing Fee Paid

### SUBMITTED BY:

Typed or Printed Name: Tom Van Zandt

Signature: *Tom Van Zandt* Date: 10/16/01

Reg. Number: 43,219 Telephone Number: (408) 720-8300

0998242 101601

"Express Mail" mailing label number: EL371009814US  
Date of Deposit: October 16, 2001

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

Leah Resendez

(Typed or printed name of person mailing paper or fee)

Leah Resendez  
(Signature of person mailing paper or fee)

10-16-01  
(Date signed)

Serial/Patent No.: Not yet Assigned Filing/Issue Date: Herewith  
Client: Intel Corporation  
Title: METHOD AND APPARATUS TO EMULATE EXTERNAL IO INTERCONNECTION

BSTZ File No.: 42390P11916X Atty/Secty Initials: JPW/TAV/lr  
Date Mailed: 10/16/01 Docket Due Date: \*\*\*

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Amendment/Response (____ pgs.)   | <input checked="" type="checkbox"/> Express Mail No.: <u>EL371009814US</u>           | <input checked="" type="checkbox"/> Check No. <u>45978</u> |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate)                               | <input type="checkbox"/> _____ Month(s) Extension of Time                            | Amt <u>\$920.00</u>  |
| <input type="checkbox"/> Application - Utility (____ pgs., with cover and abstract)             | <input type="checkbox"/> Information Disclosure Statement & PTO 140 (____ pgs.)      | <input type="checkbox"/> Check No. _____                   |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)                    | <input type="checkbox"/> Issue Fee Transmittal                                       | Amt _____  |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)                      | <input type="checkbox"/> Notice of Appeal  |  |
| <input checked="" type="checkbox"/> Application - Rule 1.53(b) CIP ( <u>15</u> pgs.)            | <input type="checkbox"/> Petition for Extension of Time                              |  |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.)                 | <input type="checkbox"/> Petition for _____  |  |
| <input type="checkbox"/> Application - Design (____ pgs.)                                       | <input checked="" type="checkbox"/> Postcard   |  |
| <input type="checkbox"/> Application - PCT (____ pgs.)  | <input type="checkbox"/> Power of Attorney (____ pgs.)                               |  |
| <input type="checkbox"/> Application - Provisional (____ pgs.)                                  | <input type="checkbox"/> Preliminary Amendment (____ pgs.)                           |  |
| <input type="checkbox"/> Assignment and Cover Sheet   | <input type="checkbox"/> Reply Brief (____ pgs.)                                     |  |
| <input type="checkbox"/> Certificate of Mailing   | <input type="checkbox"/> Response to Notice of Missing Parts                         |  |
| <input checked="" type="checkbox"/> Declaration & POA ( <u>5</u> pgs.)                          | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business |  |
| <input type="checkbox"/> Disclosure Docs & Orig. & Copy of Inventor's Signed Letter (____ pgs.) | <input type="checkbox"/> Transmittal Letter, in duplicate                            |  |
| <input checked="" type="checkbox"/> Drawings: <u>4</u> # of sheets includes <u>6</u> figures    | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate                    |  |

☒ Other: Certificate of Express Mail with copy of postcard showing contents of package.